Project No:	
Project No:	

APPLICATION FOR COMMERCIAL/RESIDENTIAL DEMOLITION

The City of Grove City 4035 Broadway Grove City, Oh 43123 Phone (614) 277-3075 www.grovecityohio.gov Fax (614) 277- 3090

, ,	
Property Information	Owner Information
Address Parcel ID	
City State Zip	
Zoning HPA Rental Property	Address:
Subdivision Lot Number Building	
Project Information	State: Zip: Phone:
Project Name/Tenant:	& cece
Number of Structures: No of Units: Acreage:	Construction Type:
Total Const. Square Feet: Ownership Type: _	Private Public #
Type of Improvement: Addition/Alteration New Building Oth	
Sewage Disposal: Public Private Water Supply: Public	
Principle Frame Type: Masonary/Wall Bearing Reinforced Concre	ete Structural Steel Wood Frame
Structures containing less that 400 square feet. Total Square Feet of Structure	
☐ Structures containing 401-1,000 square feet. Total Square Feet of Structure ☐ Structures containing more than 1,000 square feet. Total Square Feet of Str	
Structures that are Commercial must add the 3% State Fee	3% State Fee \$
	Total Fee Due \$
No permit to remove or raze a building or structure shall be granted until notice of the app the building or structure is to be moved, and to the owners of wires or other impediments the to be heard, before the Building Inspector; nor until a bond of not less than fifty dollars (\$5 Safety has been filed with him to indemnify the City for damages. *	he removal of which will be necessary; and an opportunity has been given the owners
 All demolition shall proceed only on weekdays, Monday through Frida specifically extended or altered by the Administrator. 	by between 7:30 a.m. and 6:00 p.m., unless olition to assure that all procedures are being followed. or to any demolition in accordance with the Ohio more information contact the Ohio Environmental
The Administrator may order an inspection at any time during the demonstration in the de	olition to assure that all procedures are being followed.
 Asbestos Report Required. Asbestos will be handled and removed pric Administrative Code Ordinance # 3745-20. Under penalty of law. For 	more information contact the Ohio Environmental
 Protection Agency, Division of Air Pollution Control, 728-3816. The debris from any building shall be thoroughly dampened to prevent 	circulation of dust.
The demolition contractor shall call for a final inspection upon complete	
OFFICIAL USE ONLY	
Area CommissionApproving Authority	D.
Worksheet Adequacy	Date
☐ Owner's Affidavit ☐ Sewer Cap ☐ Homeowner's Affid	Date Date Date
Contractor Information	
DBA	
E-Mail	_
Signature	

DEMOLITION APPLICATION OWNER'S STATEMENT

The City of Grove City P.0. BOX 427 4035 Broadway Grove City, Oh 43123 Phone (614) 277-3075 Fax (614) 277- 3090

I (We), NAME (S)	, state that I (We) own
NAME (S)	for which a describion
the property atSTREET ADDRESS	_, for which a demolition
permit application is being made to The City of Grove City Building	
NAME OF DEMOLITION C	ONTRACTOR
and will demolish the structure on the property with my (our) approvissues a demolition permit.	
FALSIFICATION OF A PUBLIC DOCUMENT IS A VIOLATION OF THE MISDEMEANOR OF THE FIRST DEGREE, PUNISHABLE BY UP TO SE \$1,000.00 OR BOTH.	
NOTARY	
Date	
Signature of property owner(s)SignatureSignature	
SWORN to before me and subscribed in my presence this	day of in the year
Notary Public My (Commission Expires
Notary Seal Here	
Sewer/Septic/Well Ca	p Information
Is the Structure habitable? YES NO Does not have Sewer/Water services? YES NO	
• If YES, Attach Water capping permit obtained from City of Colur Dublin Road, Columbus, Ohio 43215,(614) 645-7490 for the job County Board of Health.	
 If YES, Attach letter from James Blackburn, Service Director, 32 277-1100, for Grove City Sewer, well or private septic system. 	262 Ventura Blvd., Grove City, Oh 43123 (614)
UTILITY DISCONN	ECTION
The utilities at the above property have been or will be disconnected	d prior to the demolition.
INITIAL HERE	

If you have any questions regarding this form, please call: (614) 277-3075.

Incomplete information may result in rejection of submittal.

SUBMIT ORIGINAL NOTARIZED STATEMENT